### UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA Richmond Division

In re: Colleen Beth Higgins	) Case No.: 16-30731-KLF
Debtor.	) Chapter 13

### DEBTOR'S PROPOSED EXHIBIT LIST

Your Debtor proposes the following exhibits related to the Motion to Dismiss Case filed by Laurie Pearce:

EXHIBIT A	DEBTOR'S CHART OF PAYMENTS TO MOVANT
EXHIBIT B	SPREADSHEET DOWNLOADED FROM ANTHEM INSURANCE SHOWING CLAIMS AND CO-PAYS ALLEGED BY MOVANT
EXHIBIT C	REPORT DOWNLOADED FROM ANTHEM INSURANCE SHOWING CLAIMS AND CO-PAYS ALLEGED BY MOVANT
EXHIBIT D	REPORT DOWNLOADED FROM DELTA DENTAL INSURANCE SHOWING CLAIM AND CO-PAY ALLEGED BY MOVANT
EXHIBIT E	CHECK FROM DEBTOR TO MOVANT SATISFYING ALL MEDICAL CLAIMS MADE BY MOVANT PER HIS DEMAND GMAIL OF APRIL 16, 2021
EXHIBIT F	APRIL 30, 2021 EMAIL FROM DEBTOR TO MOVANT EXPLAINING WHY SHE IS CURRENT ON HER PORTION OF ALL COURT ORDERED MEDICAL PAYMENTS
EXHIBIT G	APRIL 30, 2021 PAYMENT RECEIPT OF HENRICO COUNTY MENTAL HEALTH & DEVELOPMENTAL SERVICES FOR PAYMENT OF \$50.00 PAID BY DEBTOR (NOT BEING ALLEGED DELIQNUENT BY MOVANT)

EXHIBIT H	HENRICO JUVENILE AND DOMESTIC RELATIONS COURT ORDER VERIFYING DEBTOR IS CURRENT ON HER MEDICAL PAYMENTS THROUGH SEPTEMBER 14, 2020
EXHIBIT I	APRIL 16, 2021 GMAIL FROM MOVANT TO DEBTOR ALLEGING MEDICAL DELINQUENCY OF \$182.09

### Colleen Beth Higgins

### /s/ Brett Alexander Zwerdling Counsel Certificate of Service

I hereby certify that on May 12, 2021 a true copy of the foregoing was mailed by first class U.S. mail, or electronically served, and emailed as noted upon the following:

Office of the U.S. Trustee 701 E. Broad St, Room 4304 Richmond, VA 23219

Suzanne E. Wade, 13 Trustee P.O. Box 1780 Richmond, VA 23218 Laurie Pearce 2311 Thousand Oaks Drive Henrico, VA 23294

And by email to Laurie Pearce at lp23294us@yahoo.com

/s/ Brett Alexander Zwerdling

# Case 16-30731-KLP Doc 191 Filed 05/12/21 Entered 05/12/21 12:50:15 Desc Main Document Page 3 of 28

<u>Date Movant Used</u>	Co-Pay Amount Alleged by Movant	Provider as Listed by Movant	Court Ordered Amount for Debtor	47% of Alleged Co-Pay		Amt Owed per Debtor	Date Paid by Debtor	Check #	<u>Date</u> Negotiated by Movant	Total Amt of Check	Evidence
11/6/20	\$25.00	Henrico Mental Health	47%	\$11.75	There were no co-pays for Henrico Area Mental Health for Oct / Nov, 2020 - SEE EXHIBITS B and C	\$0.00					EXHIBITS B & C
11/10/20	\$378.00	Gardener Orthdontics	47%	\$177.66	After insurance claim was submitted, the co-pay was reduced to \$189.00 SEE EXHIBIT D - 47% of \$189.00 is \$88.83, which the Debtor paid to Movant	\$88.83	3/24/21	595	3/26/21	\$144.10	EXHIBIT E
11/10/20	\$117.60	Richmond Pediatric Dentistry	47%	\$55,27	Amount is undisputed	\$55.27	3/24/21	595	3/26/21	\$144.10	EXHIBIT E
3/20/21	\$10.00	refund \$10 richmond pediatric	47%	-\$4.70	Debtor does not know what this is / no documentation provided.						
			SUBTOTAL	\$239.98							
		He mentions a credit of \$57.89 for reasons unknown	Less "credit"	-\$57.89							
			TOTAL	\$182.09		\$144.10					
					EXHIBIT E - Check No. 595 paid to Movant	-\$144.10					
					Amount owed to Movant by Debtor	\$0.00					
					Movant testified at the heaing on April 21, 2021 that he had received a bill the day prior, but to date Debtor has received no information as to what this is.						

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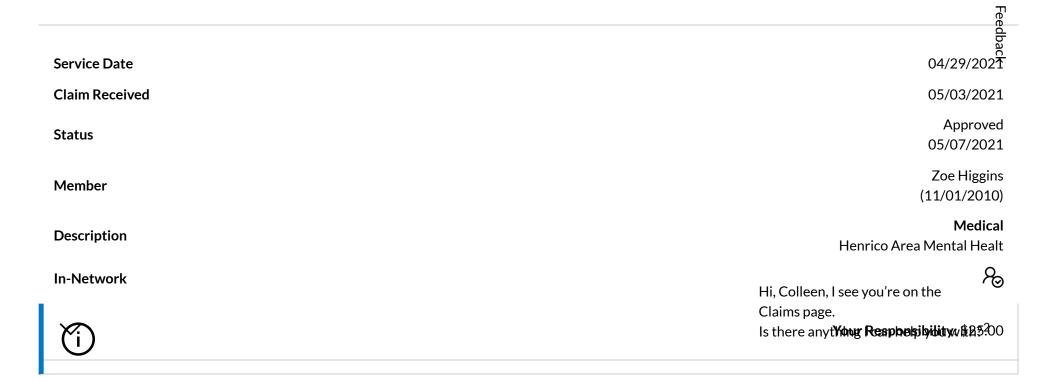
### Anthem. Commonwealth of Virginia

Claim Type	Claim Number	Patient	Service Date	Claim Received Status	Processed Date Provided By	Billed	Plan Discount	Allowed	Plan Paid	Deductible	Coinsurance	Copay	Not Covered	Your Cost
Medical	2021090DR2077	Zoe (11/01/2010)	18-Mar-21	31-Mar-21 Approved	31-Mar-21 Henrico Area Mental Healt	\$70.00	\$0.00	\$70.00	\$45.00	\$0.00	\$0.00	\$25.00	\$0.00	\$25.00
Medical	2021064DA1440	Zoe (11/01/2010)	29-Jan-21	5-Mar-21 Approved	6-Mar-21 Henrico Area Mental Healt	\$70.00	\$0.00	\$70.00	\$45.00	\$0.00	\$0.00	\$25.00	\$0.00	\$25.00
Medical	2021064DA1581	Zoe (11/01/2010)	8-Jan-21	5-Mar-21 Approved	6-Mar-21 Henrico Area Mental Healt	\$70.00	\$0.00	\$70.00	\$45.00	\$0.00	\$0.00	\$25.00	\$0.00	\$25.00
Medical	2020356EB1929	Zoe (11/01/2010)	18-Dec-20	21-Dec-20 Approved	22-Dec-20 Pediatric Associates Of R	\$149.00	\$27.96	\$121.04	\$121.04	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pharmacy	2.03264E+1	.4 Zoe (11/01/2010)	21-Nov-20	Not Available Approved	21-Nov-20 Buford Road Pharmacy	\$174.15	\$140.15	\$34.00	\$34.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Medical	2020309BG2369	Zoe (11/01/2010)	21-Oct-20	4-Nov-20 Approved	4-Nov-20 Henrico Area Mental Healt	\$70.00	\$0.00	\$70.00	\$70.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Medical	2020309BG1985	Zoe (11/01/2010)	9-Oct-20	4-Nov-20 Approved	4-Nov-20 Henrico Area Mental Healt	\$70.00	\$0.00	\$70.00	\$70.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Medical	2020309BG2224	Zoe (11/01/2010)	2-Oct-20	4-Nov-20 Approved	4-Nov-20 Henrico Area Mental Healt	\$70.00	\$0.00	\$70.00	\$70.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Medical	2020275BJ4097	Zoe (11/01/2010)	25-Sep-20	1-Oct-20 Approved	1-Oct-20 Henrico Area Mental Healt	\$70.00	\$0.00	\$70.00	\$70.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

To pay a provider for a balance you owe on a claim, go to Payment & Billing

You are viewing claims for your specified criteria. Use more filters to customize your claims experience.





https://membersecure.anthem.com/member/claims

**Service Date** 

3/16

03/18/2021

5/12/2021 Claim Received	Case 16-30731-KLP	Doc 191 Filed 05/12/21 clantered 05/12/21 12:50:15  Document Page 6 of 28	Desc Main 03/31/ <del>2021</del>
Status			Approved 03/31/2021
Member			Zoe Higgins (11/01/2010)
Description			<b>Medical</b> Henrico Area Mental Healt
In-Network			26
~			Your Responsibility: \$25.00
Service Date			01/29/2021
Claim Received			03/05/202
Status			03/05/202 <b>9</b> Approve <b>a</b> 03/06/2021
Member			Zoe Higgins (11/01/2010)
Description			<b>Medical</b> Henrico Area Mental Healt
In-Network			20
<b>~</b>			Your Responsibility: \$25.00
			Hi, Colleen, I see you're on the
Service Date			Claims page. Is there anything I can help y01/08/12:021
Claim Received			03/05/2021
Status			Appr <del>oved</del> 03/06/202 <sup>h</sup>

5/12/2021  Description  In-Network	Case 16-30731-KLP	Doc 191 Filed 05/12/21 ៧៩៣៤ Page 8 of 28	Desc Main  Pharmacy  Buford Road Pharmacy
<b>\</b>			Your Responsibility: \$0.00
Service Date			10/21/2020
Claim Received			11/04/2020
Status			Approved 11/04/2020
Member			Zoe Higgins (11/01/2010)
Description			<b>Medic</b> Henrico Area Mental Hea <del>[€</del>
In-Network			Henrico Area Mental Hea
~			Your Responsibility: \$0.00
Service Date			10/09/2020
Claim Received			11/04/2020
Status			Approved 11/04/2020
Member i Description		H C Is	Hi, Colleen, I see you're on the Zoe Higgins Claims page. (11/01/2010) s there anything I can help you with? Medical  Henrico Area Mental Healt
			meninco Area Mentai Healt

In-Network

Service Date 10/02/2020
Claim Received 11/04/2020
Status Approved 11/04/2020
Member Zoe Higgins (11/01/2010)
Description Medical Henrico Area Mental Healt
In-Network Your Responsibility: \$0.08

Service Date 09/25/2020

Claim Received 10/01/2020

Status Approved 10/01/2020

Member Zoe Higgins (11/01/2010)

Medical
Description

Hi, Colleen, I see you're on the
Henrico Area Mental Healt
Claims page.

In-Network

In-Network

Your Responsibility: \$0.00

5/12/2021

Hi, Colleen, I see you're on the

Claims page.

Is there anything I can help you with?<sup>2</sup>

Your Responsibility: \$0.00



In-Network

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2/2021 	Case 16-30731-KLP	Doc 191 Filed 05/12/21 េាម ered 05/12/21 12:50:15 Desc Main  Document Page 11 of 28
Claim Received		08/20/2
Status		Appro 08/21/2
Member		Zoe Hig (11/01/20
Description		<b>Me</b> c Henrico Area Mental H
In-Network		
<b>~</b>		Your Responsibility: \$0
Service Date		06/25/2
Claim Received		07/02/2
Status		Appro 07/02/2
Member		Zoe Hig (11/01/20
Description		<b>Me</b> c Henrico Area Mental H
In-Network		
<b>~</b>		Your Responsibility: \$0 Hi, Colleen, I see you're on the Claims page.
Service Date		Is there anything I can help you with:  05/19/2
Claim Received		07/02/2 Г
		Appro

Case 16-30731-KLP Doc 191 Filed 05/12/21 cleatered 05/12/21 12:50:15 Desc Main 5/12/2021 Document Page 12 of 28 07/02/2020 **Status** Zoe Higgins Member (11/01/2010)Medical Description Henrico Area Mental Healt Q In-Network Your Responsibility: \$0.00 05/05/2020 **Service Date Claim Received** 07/02/2020 Approved 07/02/202 **Status** Zoe Higgin Member (11/01/2010)Medical Description Henrico Area Mental Healt Ro In-Network Your Responsibility: \$0.00 04/22/2020 **Service Date** Hi, Colleen, I see you're on the **Claim Received** Claims page. 07/02/2020 Is there anything I can help you with? 2 Approved 07/02/2020 Zoe Higgins

Member

(11/01/2010)

Your Responsibility: \$0.00

**Service Date** 03/16/2020

**Claim Received** 03/23/2020

Approved **Status** 03/23/2020

Zoe Higgins Member (11/01/2010)

Hi, Colleen, I see you're on the Medical Claims page.
Henrico Area Mental Healt
Is there anything I can help you with? Description Network

Your Responsibility: \$25.00

**Service Date** 02/28/2020 **Claim Received** 03/09/2020 Approved **Status** 03/09/2020 Zoe Higgins Member (11/01/2010)Medical Description Henrico Area Mental Healt In-Network Your Responsibility: \$25.00 **Service Date** 01/29/2020 **Claim Received** 02/12/2020 Approved **Status** 02/13/2020 Zoe Higgins Member (11/01/2010) Hi, Colleen, I see you're on the Medical Claims page. Description Is there anything rican Avera Mental Interalt Q In-Network

Service Date	11/27/2019
Claim Received	12/17/2019
Status	Approved 12/20/2019
Member	Zoe Higgins (11/01/2010)
Description	<b>Medical</b> Henrico Area Mental Healt
In-Network	26
<b>~</b>	Your Responsibility: \$25.0합
Service Date	11/05/2019
Claim Received	11/07/2019
Status	Approved 11/08/2019
Member	Zoe Higgins (11/01/2010)
Description	Medical Hi, Colleen, I see you're Onthe inginia Inc
In-Network i	Claims page.  Is there anything I can help you with? 2
Ž	Your Responsibility: \$68.48

5/12/2021

5/12/2021	Case 16-30731-KLP	Doc 191 Filed 05/12/21 clantered 05/12/21 12:50:15 Document Page 17 of 28	Desc Main
Service Date		Document Fage 17 of 20	11/05/2019
Claim Received			11/06/2019
Status			Approved 11/07/2019
Member			Zoe Higgins (11/01/2010)
Description			<b>Medical</b> Pediatric Associates Of R
In-Network			26
~			Your Responsibility: \$25.00
Service Date			07/29/201 <del>8</del>
Claim Received			08/02/2019
Status			Approved 08/03/2019
Member			Zoe Higgins (11/01/2010)
Description			<b>Medical</b> Pediatric Associates Of R
In-Network			20
· ~			Hi, Colleen, Lsee you're on the Claims page.
i			Is there anything I can help you with? <sup>2</sup>
		All the claims for the selected date range are displayed	

# -eedback

### Resources

### **Claim Forms**

Access the forms you need to submit or dispute a claim.

Find Forms (forms?deepLinks=true)

### Need Help?

Have a question about your claim? We're here to assist.

Contact Us (contact-us)

Enroll in the Identity Protection Program (https://portal.allclearid.com/enrollment/4?PCD=ANTHEMCARES2021/) available to you provided by AllClear ID.

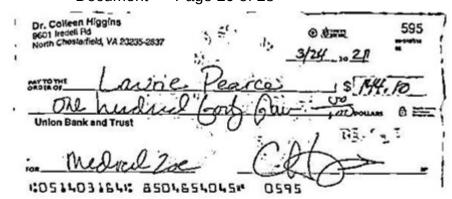
Hi, Colleen, I see you're on the Claims page.
Is there anything I can help you with?<sup>2</sup>

### Case 16-30731-KLP Doc 191 Filed 05/12/21 Entered 05/12/21 12:50:15 Desc Main Document Page 19 of 28

My Plan: My Recent Dentists: Name: **COLLEEN HIGGINS** Name: WILLIAM GARDNER 00010111111-000000001-Group Number: 0000000045 Address: 1206 Willow Lawn Dr Richmond, VA 23226 4242671XU ID: Plan: PPO/Premier Benefit Network Contact: 1-804-282-0505 Membership Type: SUBSCRIBER/CHILD **Claims** Q View Report of All Claims SHOWING FROM: SHOWING TO: CLAIMS SHOWN FOR: 05/12/2020 05/12/2021 ZOE HIGGINS Claims for ZOE have \$296.60 in total out-of-pocket expenses. Claims for the entire family have \$338.60 in total out-of-pocket expenses. View Claim 202113001224 ( Paid) Claim: GARDNER, WILLIAM G 10 View contact info Provider: ZOE HIGGINS Member: Code Procedure Date Plan Pays You Pay 11/23/2020 D8010 LIMITED ORTHODONTIC TREATMENT PRIMARY DENTITION \$189.00 \$189.00

Total \$189.00 \$189.00

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### Case 16-30731-KLP Doc 191 Filed 05/12/21 Entered 05/12/21 12:50:15 Desc Main Document Page 21 of 28

#### **Brett Zwerdling**

From: Colleen Higgins [cailin.higgins@gmail.com]

**Sent:** Friday, April 30, 2021 4:36 PM

To: laurie pearce Subject: Re: medical bills

Attachments: HMH pd 50 apr30 2021.pdf

Hello Laurie,

I have reviewed your most recent claims. I have crossed through the ones that are not correct.

6-Nov-20	\$25.00	Henrico mental health	47%	<del>\$11.75</del>
-	\$278 NO		470/	•
<del>10-Nov-20</del>	<del>\$378.00</del>	Gardener ortho	<del>-47%-</del>	<del>\$177.66</del>
10-Nov-20	\$117.60	Richmond pediatric dentistry	47%	<del>\$55.27</del>
-	¢111.00		470/	*
20-Mar-21	\$10.00	refund \$10 richmond pediatric	47%	-\$4.70

Your portion is \$239.98 minus \$57.89 credit = \$182.09

The HMH had \$0.00 copay for November 2020. Copays were \$0 for HMH 7/2/20-1/1/21. I am not sure what you paid for, but there were no medical charges for Zoe. See below. I paid HMH \$50 for 2 copays for DOS 1/29/21 and 3/30/21. See attached receipt.

The dentist and orthodontics were already paid to you and explained in my letter and again as follows below. I explained that the Gardner Orthodontics \$378 claim after submitting to insurance is reduced to \$189. I paid 47% of the \$189 which is \$88.83. See below. You should follow up and make sure that the office submitted the claim and seek a refund.

You have been clearly presented with this information already 3/24/2021, yet are seeking them <u>again</u> through another court venue. **Currently, you owe me \$31.20** which is 53% of the \$50 HMH bills I have paid, and the \$4.70 refund.

Please see below and stop this harassment.

Sincerely, Colleen

\*\*\*\*\*\*\*\*\*\*

Pearce paid claims 2020 - present

pre-insurance

378.00

Nov 10 2020 Gardner Orthodontics

Oct 15 2020 Richmond Pediatric Dentistry

march 24 2021 paid to pearce \*\*\*\*\*\*\*\*\*\*\*\*

Case 16-30731-KLP Doc 191 Filed 05/12/21 Entered 05/12/21 12:50:15 Desc Main Document Page 22 of 28 Dr. Colleen Higgins Union Bank and Trust 1:0514031641: 8504654045# 0595

**Service Date** Claim Received **Status** Member **Description** 

#### In-Network

Your Responsibility

List of claims based on the applied filters. For additional information on a claim, select expand information button in the second column

Claim IDAdditional claim detailsService DateClaim ReceivedStatusMemberDescriptionIn-NetworkYour

Responsibility

2021090DR2077

03/18/2021

03/31/2021

Approved

ClaimApproved03/31/2021

Zoe Higgins

(11/01/2010)

Medical

Henrico Area Mental Healt

Yes

\$25.00

2021064DA1440

01/29/2021

03/05/2021

Approved

ClaimApproved03/06/2021

Zoe Higgins

(11/01/2010)

Medical

Henrico Area Mental Healt

## Case 16-30731-KLP Doc 191 Filed 05/12/21 Entered 05/12/21 12:50:15 Desc Main Document Page 23 of 28

	Document	Page 23 of 28 Yes	
2021064DA1581 01/08/2021 03/05/2021 Approved ClaimApproved03/06/2021 Zoe Higgins (11/01/2010) Medical Henrico Area Mental Healt		Yes	\$25.00
2020309BG2369 10/21/2020 11/04/2020 Approved ClaimApproved11/04/2020 Zoe Higgins (11/01/2010) Medical Henrico Area Mental Healt			\$25.00
2020309BG1985 10/09/2020 11/04/2020 Approved ClaimApproved11/04/2020 Zoe Higgins (11/01/2010) Medical Henrico Area Mental Healt		Yes	\$0.00
2020309BG2224 10/02/2020 11/04/2020 Approved ClaimApproved11/04/2020 Zoe Higgins (11/01/2010) Medical Henrico Area Mental Healt		Yes	\$0.00
2020275BJ4097 09/25/2020 10/01/2020 Approved ClaimApproved10/01/2020 Zoe Higgins (11/01/2010) Medical Henrico Area Mental Healt		Yes	\$0.00
2020246CS8260			\$0.00

Case 16-30731-KLP	Doc 191 Filed 05/12/21 Entered 05/12/21 12:50:15 Document Page 24 of 28	Desc Main
08/25/2020 09/02/2020 Approved ClaimApproved09/03/2020 Zoe Higgins (11/01/2010) <b>Medical</b> Henrico Area Mental Healt	Yes	
2020233BY6068 07/28/2020 08/20/2020 Approved ClaimApproved08/21/2020 Zoe Higgins (11/01/2010) Medical Henrico Area Mental Healt	Yes	\$0.00
000000000000000000000000000000000000000	Yes	\$0.00
2020233BY5319 07/15/2020 08/20/2020 Approved ClaimApproved08/21/2020 Zoe Higgins (11/01/2010) Medical Henrico Area Mental Healt	Yes	
2020184BB5559 06/25/2020 07/02/2020 Approved ClaimApproved07/02/2020 Zoe Higgins (11/01/2010) Medical Henrico Area Mental Healt		\$0.00
	Yes	\$0.00
2020184BB5869 05/19/2020 07/02/2020 Approved ClaimApproved07/02/2020 Zoe Higgins (11/01/2010) Medical Henrico Area Mental Healt	Voo	
0000404PP5000	Yes	\$0.00
2020184BB5336 05/05/2020 07/02/2020		

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Approved
ClaimApproved07/02/2020
Zoe Higgins
(11/01/2010)
Medical
Henrico Area Mental Healt

Yes

\$0.00

On Fri, Apr 16, 2021 at 3:10 PM laurie pearce < <u>lp23294@yahoo.com</u>> wrote: Colleen

per the court order Bills dated between November 14, 2018 and September 14, 2020 were \$420.38. I received payments from you in the amount of \$478.27 which leaves you with a credit of \$57.89

Attached are three medical payments since 14 sept 2020:

6-Nov-20	\$25.00	Henrico mental health	47%	\$11.75		
10-Nov-20	\$378.00	Gardener ortho	47%	\$177.66		
10-Nov-20	\$117.60	Richmond pediatric dentistry	47%	\$55.27		
20-Mar-21	\$10.00	refund \$10 richmond pediatric	47%	-\$4.70		
Value martials in \$220.00 minus \$57.00 and \$1 - \$400.00						

Your portion is \$239.98 minus \$57.89 credit = \$182.09

Also please let me know when you have added me as an authorized user to zoes medical insurerance.



### Payment Receipt

Your payment has been accepted

Confirmation #

542709465

Payment Type

Mental Health & Developmental Services

Account #

Zip Code

Status

Accepted

Payment Date

Apr 30, 2021 - 3:07:04 PM

Payment Method

\*\*\*\*\*5045

Payment Amount

\$50.00

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ORDER Commonwealth of Virginia	Case No. JA085382-01-04
HENRICO COUNTY J&DR- ADULT	Juvenile and Domestic Relations District Court
PEARCE, LAURIE JOHN v/In re:	
THE FOLLOWING PARTIES WERE PRESENT:	
[ ] Juvenile [ ] Attorney:	Probation Officer
[ ] Guardian ad Litem	
[ ] Parent[] Parent [] FATHER	] Parent
[] Guardian[	
[X] Petitioner/Complainant [X] Attorney: South	
[X] Respondent/Defendant [X] Attorney:	
[ ] Commonwealth's Attorney:	
Type of Case: [ ] Felony [ ] Misdemeanor [ ] CHINS [ ] Custody [ ] Vi	
Type of Hearing:  [ ] Determination/Appointment of Counsel [ ] Detention Hearing [ ] Adjudicatory Hearing [ ] Disposition Hearing [ ] Continuous [ ] Continu	
[ ] Show Cause [ ] Trial [ ] Motion [ ]	
PLEA:	
FINDINGS OF THE COURT: THE SHOW CAUSE IS DISMISSED AS MOTHER PAID SLIGH CASE. THE PARTIES STIPULATE THAT ALL UNINSURED M THROUGH SEPTEMBER 14, 2020 HAVE BEEN PAID IN FULL THE ATTEMPT TO COLLECT COSTS OWED OUTSIDE OF TH	EDICAL COSTS FROM NOVEMBER 14, 2018 . THIS DOES NOT IN ANY MANNER PROHIBIT
IT IS ORDERED THAT: THE COURT FINDS THAT FATHER CONSISTENTLY SENT MEMAIL ADDED ANY NEW BILLS OVER MANY MONTHS. WIND PAY DUE TO WHAT SHE BELIEVED WERE OFFSETTIN THAT RESPONSE TO FATHER. THEREFORE THE COURT DOCUMED THE SHOW CAUSE PRIOR TO COURT THUS, THE SHORDERS EACH PARTY TO PAY UNPAID MEDICAL EXPENSION DOCUMENTATION IN THE FORM OF A BILL WITHIN 30 DATHE INSURANCE ON THE CHILD. THEREFORE, MOTHER IS BENEFITS FROM THE FATHER AS SHE HAS THE MOST ACC TO ENSURE THE INSURANCE COMPANY GIVES ACCESS TO EXPLANATION OF BENEFITS AND BENEFIT INFORMATION EXPENSES FROM TODAY FORWARD BASED ON A CLAIM OF MUST PURSUE ANY ALLEGED PRIOR DEBTS IN A SEPARATION OF A SILL WITHIN SOURCE CONTINUES OF CONTINUES	HILE MOTHER TODAY CLAIMS THAT SHE DID G AMOUNTS OWED TO HER, SHE NEVER GAVE DES FIND SHE REFUSED TO PAY BUT THAT SHE HOW CAUSE IS DISMISSED. THE COURT HEREBY DES WHICH ARE PROVIDED WITH YS OF RECEIPT OF SUCH BILL. MOTHER HAS NOT ENTITLED TO AN EXPLANATION OF DESS TO THE INSURANCE COMPANY. MOTHER IS DEFATHER, THE LEGAL CUSTODIAN, OF ALL H. NEITHER PARTY MAY DECLINE TO PAY ANY DEFOFSETTING DEBT OWED TO THEM. THEY TO PROCEEDING. A FAILURE TO PAY WITHIN DEMPT. THE COURT NOTES THAT THIS COURT SET BETWEEN PARTIES. THE DEBT OF PRIOR  CALL PROVIDED TO HER.
This case is continued to:	
03/31/2021	Varoareta Kell
DATE	JUDGE

FORM DC-570 REVISED 11/16

Colleen Higgins <cailin.higgins@gmail.com>

#### medical bills

2 messages

4/19/2021

laurie pearce <lp23294@yahoo.com>
To: Colleen Higgins <cailin.higgins@gmail.com>

Fri, Apr 16, 2021 at 3:10 PM

#### Colleen

per the court order Bills dated between November 14, 2018 and September 14, 2020 were \$420,38. I received payments from you in the amount of \$478.27 which leaves you with a credit of \$57.89

Attached are three medical payments since 14 sept 2020:

6-Nov-20	\$25.00	Henrico mental health	47%	\$11.75
10-Nov-20	\$378.00	Gardener ortho	47%	\$177.66
10-Nov-20	\$117.60	Richmond pediatric dentistry	47%	\$55.27
20-Mar-21	\$10.00	refund \$10 richmond pediatric	47%	-\$4.70
	1 0000 00	. 4== 00 4400.00		

Your portion is \$239.98 minus \$57.89 credit = \$182.09

Also please let me know when you have added me as an authorized user to zoes medical insurerance.

#### 3 attachments



IMG\_0001.jpg 2201K



IMG\_0002.jpg 1105K

IMG\_0003.jpg 263K